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ABSTRACT

This paper illustrates the construction, delivery, and processing of therapeutic stimulus metaphors in couple or family therapy. An introduction to the therapeutic metaphor discusses the uses of metaphors in therapy to denote a likeness between a client and another object or person, and to avoid client resistance. The usefulness of metaphors in individual, couple, and family therapy at times when progress has slowed is explained. Six outcome themes of therapeutic metaphors are listed and the technique of providing the client with a metaphoric framework shaped around one or more of these outcome themes is described. The therapeutic process described involves giving the client an incomplete story that includes elements of the conflict being experienced by the client and having the client continue the story by providing possible solutions to or ways of working with the conflict in the stimulus metaphor. Two case reviews are presented which sketch the client's problem, give the metaphor created, and break down the process by framework, problem or issue, metaphorical image, and therapeutic issue. Basic consideration when constructing a therapeutic metaphor, therapeutic considerations in the prescription and delivery of the metaphor, and suggested content areas for metaphor creation are discussed. Opportunities to create stimulus metaphors are provided. (NB)

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# Creating and Prescribing Metaphors in Couple and Family Therapy

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# THE THERAPEUTIC METAPHOR

Haley (1977) notes that analogic or metaphoric communication is common in human interaction, and he makes a distinction between digital and analogic or metaphoric communication. With digital communication each statement has only one referent; that is, there is one specific stimulus and one specific response. For example, the wife tells the husband that she has a headache, he expresses regrets and asks if he can get her an aspirin. Digital communication is, however, less prevalent in human interaction than analogic or metaphoric communication. With metaphoric communication multiple referents exist; that is, multiple stimuli and multiple responses emanate from a single interaction. If the wife complains of a headache, the husband may take this to mean that the wife desires emotional distance and, in turn, the husband might arrange for a night out with the boys which is interpreted by the wife as insensitivity. The multiple referents of metaphoric communication are common in many of our everyday statements: "We're simply hard headed" "I guess I'm rather thin-skinned" "oh, we're just like two peas in a pod" "They're like night and day."

Metaphors are used in therapy to help denote a likeness between the client and another object or person. This likeness between the client or the situation and the metaphoric object provokes a perceptual change for the client and/or the client's family which can facilitate problem resolution. Andolfi, Angelo, Menghi, and Nicolo-Corigliano (1983) note that any therapeutic message is comprised of four parts: (a) the therapist (b) says something (c) to a client (d) in a therapeutic setting. They go on to mention that when a therapeutic metaphor is utilized, one or more of these components is denied. The therapist denies (a) that he or she has sent a message, (b) that a particular message was sent (c) that the client was the desired receiver of the message, or (d) that the message was aimed at therapeutic change. This denial decreases the chance of the client objecting to the therapist's message. Anderson (1983) indicates metaphors are a handy way for clients to save face. They provide a way for clients to change without having to admit they have been mistaken or that their ways of coping haven't worked.

Thus, we have found the greatest use for metaphors in individual, couple and family therapy at those times when progress has seemingly slowed or stopped. At these times, depending on one's theoretical perspective, one would believe resistance is high, therapy is at an impasse, the couple, family and even the therapist is stuck in a repeated and unsuccessful pattern of problem solving, there is an inability to define a solvable problem, and/or energy is low.

Because of the multiple referents implied and available in a metaphor and because it appears the therapist is not attempting to teach or direct the clients to a specific end, the client's resistance can be avoided. Consequently, clients are able to think more freely, to select aspects of the metaphor that appeal and/or apply to them and consequently to get a new perspective on possibilities for greater functioning in their relationships.

Lankton and Lankton (1983) describe Milton Erickson's use of therapeutic metaphors. The Lanktons note that people become clients when they are unable to perceive viable options to problems and that therapeutic metaphors can be used to alter the client's perceptions. As was Erickson's practice, the Lanktons use stories as a metaphoric picture of the client and his or her complaint. Embedded within the story are alternative ways for the clients to view the world. In constructing a metaphoric story the Lanktons identify desired therapeutic objections and develop a metaphor around one or all of six outcome themes: (a) more appropriate intimacy, (b) improved self-image, (c) healthier attitude toward relationships with others, (d) improved behavior toward self and others, (e) better adjustment to changing family life cycle, and (f) finding enjoyment in life through recreation and work.

In our own use of metaphors in couple and family therapy, we are providing clients with a metaphoric framework, an incomplete story that includes elements of the conflict(s) that we believe the clients are experiencing. Our metaphoric framework is shaped around one or more of the outcome themes defined by the Lanktons (1983). The clients create a story a metaphor, that provide a possible solution or way of working with the dilemmas and conflicts posed in our stimulus metaphor.

This presentation illustrates the construction, delivery, and processing of therapeutic stimulus metaphors in couple and family therapy. Video taped examples and an opportunity to create stimulus metaphors are provided.

Case Review: Julie

Julie came to the Guidance Bureau in November, 1985 and has been seen approximately fifteen times in counseling. She is nineteen years old and the youngest of three children. Her mother is a teacher and is working toward her master's degree. Although her father is working as an engineer, he has had two serious strokes and Julie has been told he is dying. Julie is struggling in her attempt to separate from her parents and live independently. Her moves toward emancipation are criticized by her parents and complicated by her father's illness. An issue in therapy has been to strengthen the boundary between Julie and her parents.

Julie is also involved with a boyfriend who she admits is physically and emotionally abusive to her. She works part-time in a nursing home and spends most of her paycheck on this boyfriend. Julie seems to have little faith in her own ability to make decisions and lets her parents, boyfriend and friends make decisions for her. Julie is functioning well in college and in her job and plans to work toward a career in nursing. Another therapeutic issue has been to enhance Julie's self-concept in order to balance the power and responsibility in her relationships. In counseling, Julie was asked to complete the following fairy tale:

The metaphor:

"There was a princess who lived with the King and Queen - she was very pretty. War was threatening the Kingdom and the King and Queen wanted the princess to stay with them in the castle - for her own protection.

However, the princess had plans to travel throughout the Kingdom; getting to know the variety of people who lived in her land. She felt that in getting to know their needs, she would know more how to help them for she had compassion and endurance.

There was a handsome young man who attracted her with his claim and mysteriousness. He wanted her to run away with him and she was afraid that if she traveled and pursued her own dream that she would lose him forever.

Even though war is invitable, she knows she has something special to offer the people of her land and she must go. How does she explain this to the King and Queen so that they will support her decision?"

| Framework | Problematic Relationship/ Issue | Metaphorical Image | Therapeutic Issue |
|---|---|---|---|
| Bonding and Age Appropriate Intimacy | Relationship with boyfriend | "Handsome young man who attracts her with his charm and mysteriousness" | Appropriate intimacy: Weakening the bond with boyfriend. |
| Self-Image Enhancement | Self-doubt<br>Low self-image | "The princess was very pretty", "She has something special to offer the Kingdom..."<br>"For she had compassion and endurance? | Re-framing self-concept. Portrays Julie as caring, independent, and capable. |
| Attitude Restructuring | Attitude that she is incapable of making decisions independently - to do so would be selfish and unloving | "She has something special to offer the Kingdom and she must go" | Affirm her individual goals - to be responsible in her relationships she has to make her own needs known. |
| Role Change | With parents<br>With boyfriend | "She was afraid that if she traveled and pursued her own dream that she would lose him forever. Even though it was inevitable she knows she has something special to offer the people of her land and she must go. How does she explain this to the King and Queen so that they will support her decision?" | Role with parents changes from dependent daughter to independent daughter asking for her parents' support. Role with boyfriend changes as she risks losing him to pursue her own goals. |
| Family Structure Change | Father dying | "War is threatening the Kingdom" | Issue of framing mother as capable, independent. Issue of helping Julie deal with father's illness and impending death and work on their present relationship. |
| | Emancipation issue | "The princess has plans to travel" | Strengthening the boundary between Julie and her parents. Life cycle issue of youngest child leaving home. |

| Framework | Problematic Relationship/ Issue | Metaphorical Image | Therapeutic Issue |
|---|---|---|---|
| | Parents protecting Julie -- telling her she's not capable. Thwarting her attempts toward independence | "The King & Queen wanted the princess to stay with them in the castle - for her own protection. | As she directly asks her parents for their support, she is empowered in the family structure as a young adult balancing her own needs with her needs for a positive relationship with her family. |
| Enjoyment of Life | Limiting her relationships to very few - issue of poor self-image | "The princess had plans to travel the Kingdom; getting to know the variety of people who live in her land. | Expanding her options toward positive change pursuing her goal to be a nurse and welcoming new relationships. |

## Metaphor Construction

The following areas are basic considerations when constructing a metaphor. The underlying promise of these areas is self-enhancement of the client.

1) Bonding and age appropriate intimacy:
   Bring the couple closer in some way; help emancipate an adolescent, secure a boundary around the couple. Life-cycle considerations of the clients would be reflected in this area.

2) Self-Image Enhancement:
   Special consideration would be given to members who are more powerless in the system. The metaphor can enhance these individuals and let them be viewed as more positive, capable, potent. The client can assume an attitude of expertise.

3) Attitude Restructuring:
   The role of the therapist is to confuse the clients. Only in that way can change take place. Reframe the client's behavior to help them see things differently, creating therapeutic changes.

4) Role Change:
   Clients may be frozen in role interactions. Try to change the interaction patterns with others. Clients can switch couple roles to help increase awareness.

5) Family Structure Change:
   Change the structure and boundaries will be influenced. The balance of power can shift to affect the powerless one in the relationship. With the extended family, a structural change can influence the source of authority within the system. Metaphor creation can address a competency area for one of the clients and give that person power in the relationship.

6) Enjoyment of Life:
   The process of change should be something that the clients feel good about and possibly create a focus on self and humor.

From: Lankton, S.R. and Lankton, C.H. (1984). The Answer Within: A Clinical Framework of Ericksonian Hypnotherapy. New York: Brunner/Mazel.

## Suggested Content Areas for Metaphor Creation

1. Fantasy: give clients a scenario for a fairy tale or science-fiction story. A fantasy can create opportunity for self-expression and imaginative alternatives to present behavior.

2. Business: have clients form a business partnership or present an organizational issue within a business. Who might be on the Board of Directors? What would be some assets and liabilities of the partnership? What stock options would be available? The partnership concept is one way of strengthening the couple relationship and forming a boundary around the couple.

3. Sports: formulate assignment re: team sport and coaching strategies. What positions would people play on a team? Who will manage the team and who will assist or will there be co-managers? How could you create team spirit among the members? The team concept enhances family togetherness.

4. Music: have clients select favorite songs or pieces of music, or musical instruments to express themselves. How could they contribute to the functioning of a band or orchestra? If there is a maestro or band director, who would that be? Select music and let clients complete it differently.

5. Cooking: have clients select a favorite recipe and plan a large "state" dinner, or compose an original recipe, translate spices and ingredients into specific traits or attributes.

6. Fiction: select a favorite movie, novel, play, etc. and describe its relationship to you or rewrite it. Who would be the main character in the movie, book, etc.? Who would be the supporting actors/actresses? Who might be the director of the play? How could a play end differently depending upon a client's situation?

7. Hero: discuss favorite hero clients would like to be and choose a hero for the spouse. What adventures would they embark upon together? What cause would they care about and try to solve?

8. Government: clients can be a part of the diplomatic circle and have ambassador roles. What would be some guidelines in responding to foreign countries? How can loyalty to the native country be maintained while forming an alliance with a host country?

METAPHOR CREATION

Cheryl and David have been married for eleven years and have two sons, 10 and 6 years of age. Cheryl and David are locked in a cycle of interaction of nagging and withdrawal.

David works at a race track and keeps all his tips for his own spending money. He likes to go out with the guys three times a week and relies on these friends for closeness.

Cheryl does child care in the home and usually has about six children at any one time. She wants David to stay at home evenings to help with their sons and develop time as a couple. Cheryl reports being very close with her mother, "like a sister".

During counseling, it is learned that the oldest son experiences bed-wetting and the youngest son has been described as being "learning-disabled" by the schools.

Prescription and Delivery of the Metaphor:
Therapeutic Considerations

1. Use of the therapy team:

   Having team members available to work with the family increases the therapist's maneuverability when determining how to prescribe a metaphor. For example, the therapist may choose to separate family members during the metaphor task in order to strengthen the boundary around a subsystem within the family.

2. Commitment:

   The therapist may use various transitions to lead into the prescription of a metaphor. An important preface to the metaphor prescription includes securing a commitment from the couple or family that they will do something - without knowing what that something involves. If they don't commit themselves to the task, don't prescribe the metaphor.

3. Prescription alternatives:

   a. To empower a family member, the therapist may ask him/her to be responsible for taking notes during the metaphor prescription.

   b. If the therapist wants a family member to assume some control during the metaphor task, the therapist may give the written metaphor to that family member.

   c. In a co-therapy situation, one therapist may tell or read the metaphor in order for the other therapist to observe the family and emphasize specific parts of the task.

   d. The family's investment in the task will depend largely on the therapist's seriousness while delivering the metaphor.

4. Formats for metaphor completion:

   a. The metaphor may be given as a homework assignment.

   b. The metaphor task may be completed in the session, with or without the therapist present. The therapist may prefer to observe the family or couple on videotape or behind a one-way mirror as they process the metaphor.

   c. The therapist may ask the family to write an ending to a story, complete a task together or enact a presentation.

5. Processing the metaphor:

   a. If a family member makes a connection between the metaphor and his/her own situation, the therapist may act surprised and impressed, attribute the connection to that family member, and stress the importance of the connection.

   b. If family members have completed the metaphor separately or in subsystems, check their responses with the other family members and process the differences and similarities in the responses.

   c. The therapist may simply ask, "How does this apply to what is going on with you"?

   d. Rather than process the responses of the family members, the therapist may use the metaphor itself as a therapeutic tool to create the experience of working together as a family on a common task.

## Case Study: Glenn and Carol

Brief Background: We began seeing Glenn and Carol in our clinic as a referral from a crisis center. They had been living together approximately two years and the presenting problem was that they felt they needed to either make their relationship more permanent or end it.

Glenn moved in with Carol at a time shortly after she had been raped, apparently in the roles of friend and protector. Carol was divorced, had two children (ages 5-7) and received ADC. Glenn was unemployed.

In early sessions, they both continually brought up each other's past in ways that were negative and quite distancing. Through a series of strategic moves we had them write aspects of their past that each was willing to bury and to seal these "pasts" in a jar. We then instructed them to go on a picnic and to bury their past at a location they could retrieve if necessary. The picnic seemed to hold significance for them as a couple. Last Christmas, Carol gave Glenn a picnic basket which included twelve "coupons" for a picnic each month.

Glenn and Carol married in December. They presented this decision in terms of the tax break marriage would offer. We have rewarded their commitment to each other in various ways and designed another metaphor to encourage them to deal with their new life together.

We have seen Glenn and Carol about a dozen times. About six sessions ago Glenn got a good job as a computer programmer. The job shifted power in their relationship, allowed him to get back into some significant drug usage and surfaced his family as the supplier for his habit. These issues have been controlled for now, but the relationship of both to their extended families has been an issue.

Metaphor prescription: Given these variables we introduced the following metaphor. We left the room while they constructed a verbal response.

Metaphor: "An investment firm is run by two equal partners. Their Board of Directors wants the partners to sell the firm. The partners want to keep the firm and want it to be successful.

One of the partners is inventive and creative. The other partner is conservative and prefers a "tried and true" approach. Together they need to convince their Board of Directors that supporting the firm rather than selling it would be a sound decision.

The partners have inherited some assets. Various resources are available to them - including a trust fund. How are the partners going to work together to persuade their Board of directors that supporting and investing in the firm rather than selling it would be in the Board's best interests?

Issues:

Metaphor Structure

Glenn & Carol

| Therapeutic Outcome Framework | Problem/Relationship Issue | Metaphoric Image | Therapeutic Issue |
|---|---|---|---|
| Bonding and Age Appropriate Intimacy | View of selves as married | Partners Together | Joining Commitment |
| Self-Image Enhancement | Both have contributions | Creative Tried and true | History of attacking other rather than supporting |
| Attitude Restructuring | Who has what rights | Future Successful, Supporting | Equal partners |
| Social Role Change | Adding role of assuming responsibility for children | Equal business change, Inherited assets | Loss of power because of income changes |
| Family Structure Change | Family supplied drugs, never visit parents as a couple | Two partners convince Board of Directors | Joining separation from family of origin |
| Enjoyment of Life | (mid-westerners do not believe in enjoyment) | | |

METAPHOR CREATION

The Vernal family is a blended one consisting of:

Dave and Sharon - married for two years
- Sean - Dave's son from the first marriage; lives with Dave and Sharon
- Josh - Dave's son from the first marriage; lives in Texas with his mother
- Heather and Karen - Sharon's daughters from her first marriage; live with Dave and Sharon
- Laura - eleven months old; Dave and Sharon's daughter

There is the presence of Sharon's first husband in this marriage who reportedly "pops" into town without any notice and wants to see the girls, his daughters. Dave's ex-wife lives in Texas and has minimal contact with this blended family. Dave described life in this first marriage as a kind of "craziness".

The Vernal family initially sought counseling for Sean who is experiencing scholastic difficulties and "senioritis", plus the adjustment to the new parental rules within the blended family.

Heather and Karen speak of feeling disloyal to their dad if they show caring for Dave, the stepfather. All the family members agree that Laura appears to be the focal point for creating togetherness in this new family.

It appears that Sharon has developed a strong relationship with Sean, and Dave has expressed that he would like to do the same with Heather and Karen, but thus far has not been able to experience closeness with them.

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